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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
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|   |                      |                            |            |
|---|----------------------|----------------------------|------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/783,491                 |            |
|   | Filing Date          | February 20, 2004          |            |
|   | First Named Inventor | Jack P. Shidemantle et al. |            |
|   | Art Unit             | 2859                       |            |
|   | Examiner Name        | Madeline Gonzalez          |            |
| Total Number of Pages in This Submission  | 9                    | Attorney Docket Number     | 650271-132 |

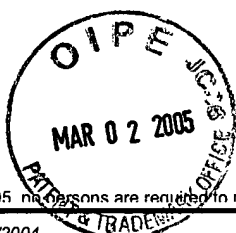
| ENCLOSURES (Check all that apply)   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input checked="" type="checkbox"/> Fee Attached                          | <input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                       | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application   | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation  | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Change of Correspondence Address   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
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| <input type="checkbox"/> Information Disclosure Statement                 | <input type="checkbox"/> Request for Refund   | Check   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | <input type="checkbox"/> CD, Number of CD(s) _____  |   |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application    | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <b>Remarks</b><br>The Commissioner is hereby authorized to charge any additional fees required (including the fee for any extension of time), or to credit any overpayment, to Deposit Acct. No.: 20-0809 |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |          |        |
|--|---|----------|--------|
| Firm Name                                  | Thompson Hine LLP<br>2000 Courthouse Plaza N.E., 10 West Second Street, Dayton, Ohio 45402-1758 |          |        |
| Signature                                  |   |          |        |
| Printed name                               | Mark P. Levy  |          |        |
| Date                                       | February 25, 2005   | Reg. No. | 27,922 |

| CERTIFICATE OF TRANSMISSION/MAILING   |              |      |                   |
|---|--------------|------|-------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: |              |      |                   |
| Signature   |              |      |                   |
| Typed or printed name   | Mark P. Levy | Date | February 25, 2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 225.00

**Complete if Known**

|                      |                            |
|----------------------|----------------------------|
| Application Number   | 10/783,491                 |
| Filing Date          | 02/20/2004                 |
| First Named Inventor | Jack P. Shidemantle et al. |
| Examiner Name        | Madeline Gonzalez          |
| Art Unit             | 2859                       |
| Attorney Docket No.  | 650271-132                 |

**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 20-0809 Deposit Account Name: Thompson Hine LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description   | Fee (\$) | Small Entity Fee (\$) |
|---|----------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50       | 25                    |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200      | 100                   |
| Multiple dependent claims   | 360      | 180                   |

|   |                     |                 |                      |                                  |                 |                      |
|---|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| <b>Total Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| 34  | - 20 or HP = 9      | x 25.00         | = \$225.00           |                                  |                 |                      |
| HP = highest number of total claims paid for, if greater than 20      |                     |                 |                      |                                  |                 |                      |
| <b>Indep. Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |                                  |                 |                      |
| 5   | - 3 or HP = 0       | x               | =                    |                                  |                 |                      |
| HP = highest number of independent claims paid for, if greater than 3 |                     |                 |                      |                                  |                 |                      |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 =             | / 50 =              | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: \_\_\_\_\_

**SUBMITTED BY**

|                                |                         |                        |
|--------------------------------|-------------------------|------------------------|
| Signature                      | Registration No. 27,922 | Telephone 937 443-6949 |
| Name (Print/Type) Mark P. Levy | (Attorney/Agent)        | Date 02/25/2005        |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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2-25-05  
Date of Deposit

[Signature]  
Attorney

27,922  
Reg. No.

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of

Application No. : 10/783,491  
Applicant : Jack P. Shidemantle et al.  
Filed : 2/20/2004  
Title : DIGITALLY MODIFIED RESISTIVE OUTPUT FOR A TEMPERATURE SENSOR  
Docket No. : 650271-132  
Art Unit : 2859  
Examiner : Madeline Gonzalez

MAIL STOP AMENDMENT  
COMMISSIONER FOR PATENTS  
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ALEXANDRIA VA 22313-1450

Sir:

**ELECTION OF SPECIES AND AMENDMENT**

In response to the Official Action dated January 26, 2005, the applicants hereby elect Species C as shown in Fig. 4. Claims 1-3, 5, 8-10, 13, 16-19, 20-22 and 25-34 read on this species. Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.